

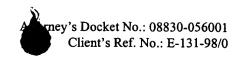
COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

| joint inve | ntor (if plural na | mes are listed below) of t | wentor (if only one name he subject matter which i A 4 PROMOTES WOUN | s claimed and for | r which a pa | tent is |
|--|---|--|---|---|--|------------------------|
|] | is attached l X] was filed or | | Application Serial No | a | nd was ame | nded on |
| [| was describ | | nternational Application I under PCT Article 19 on | | filed • | on |
| | | I have reviewed and und nended by any amendme | derstand the contents of the treferred to above. | ne above-identifi | ed specificat | tion, |
| | _ | e duty to disclose all info Regulations, §1.56. | rmation I know to be made | terial to patentab | ility in accor | dance with |
| applicatio | hereby claim the n(s) listed below | e benefit under Title 35, 1 : | United States Code, §119 | (e)(1) of any Uni | ted States pr | rovisional |
| 1. | U.S. Serial | No. | Filing Date | Sta | atus | |
| 60 | 0/094,690 | July 30 | | Pending | | |
| United Sta | ow and, insofar a ates application in dge the duty to d | s the subject matter of ean the manner provided by | United States Code, §120 ch of the claims of this apy the first paragraph of Tixnow to be material to pailable between the filing lication: | oplication is not of the 35, United St | lisclosed in tates Code, § | the prior 112, I |
| i <u>a</u> | U.S. Serial | No. | Filing Date | Sta | itus | |
| 1000 | one | | | | | |
| I application country of for patent the United | n(s) for patent or ther than the Unit or inventor's cer | inventor's certificate or ted States of America list tificate or any PCT inter- ca filed by me on the sar | der Title 35, United State of any PCT international and have also international application(s) dene subject matter having | application(s) ded dentified below a signating at least | signating at any foreign a one country | application other than |
| Co | untry | Application No. | Filing D | ate | Priority | Claimed |
| PCT | | PCT/US99/17282 | July 29, 1999 | - | [X] Yes | [] No |





Combined Declaration and Power of Attorney

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I hereby appoint the following attorneys and/or agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Richard J. Anderson, Reg. No. 36,732; Gregory P. Einhorn, Reg. No. 38,440; Mark S. Ellinger, Reg. No. 34,812; J.Eldora L. Ellison, Reg. No. 39, 967; Peter Fasse, Reg. No. 32,983; J. Patrick Finn, III, Reg. No. 44109; Janis K. Fraser, Reg. No. 34,819; John W. Freeman, Reg. No. 29,066; Diane L. Gardner, Reg. No. 36,518; Scott Harris, Reg. No. 32,030; John F. Hayden, Reg. No. 37,640; George Heibel, 42,648; Donald C. Kordich, Reg. No. 38,213; Ronald C. Lundquist, Reg. No. 37,875; Anita L. Meiklejohn, Reg. No. 35,283; Mike P. Reed, Reg. No. 45,647; Reginald Suyat, Reg. No. 28,172; Y. Rocky Tsao, Reg. No. 34,054; Hans R. Troesch, Reg. No. 36,950; Dorothy P. Whelan, Reg. No. 33,814, of FISH & RICHARDSON P.C.

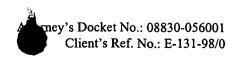
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon. Full Name of Inventor: Hynda K. Kleinman Inventor's Signature: Residence Address: Citizenship: United States of America Post Office Address: Full Name of Inventor: Allan Goldstein Inventor's Signature: Date: Residence Address: United States of America Citizenship: Post Office Address: Full Name of Inventor: Katherine M. Malinda Inventor's Signature: Date: Residence Address: Citizenship: United States of America Post Office Address:





Combined Declaration and Power of Attorney Page 3 of 3 Pages

| Full Name of Inventor: | Gabriel Sosne | | |
|---|--------------------------|-------|--|
| Inventor's Signature: Residence Address: | | Date: | |
| Citizenship: Post Office Address: | United States of America | | |

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